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Research Career Scientist
Center for Practice Management and Outcomes Research
Ann Arbor VAMC
Ann Arbor, MI

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CURRICULUM VITAE

PERSONAL DATA

Name: John Daniel Piette, MSc, PhD
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EDUCATION

09/1981 – 06/1985 University of Wisconsin at Madison. Bachelors of Arts in Political Science. Minor in Speech and Language Pathology. Graduated with Academic Honors.

09/1985 – 06/1987 Harvard School of Public Health. Masters of Science in Health Policy and Management. Emphasis on health services research methods.

09/1988 – 06/1992 Brown University. Doctorate in Epidemiology. Emphasis on chronic diseases and health services research.

ACADEMIC APPOINTMENTS

04/1992 – 05/1993 Senior Research Analyst, Institute for Health Policy Studies, University of California at San Francisco, San Francisco, CA.

05/1993 – 05/2001 Senior Research Associate, Center for Health Care Evaluation, Veterans Affairs Palo Alto Health Care System and Stanford University School of Medicine, Palo Alto, CA.

09/1994 – 07/2001 Consulting Assistant Professor, Department of Health Research and Policy, Stanford University School of Medicine, Stanford, CA.

09/1998 – 07/2001 Faculty Associate, Center for Health Policy and Center for Primary Care and Outcomes Research, Stanford University, Stanford, CA.

07/2001 – 06/2003 Senior Research Associate, Center for Practice Management and Outcomes Research, VA Ann Arbor Health Care System, Ann Arbor, MI.

07/2001– 06/2007	Associate Professor (with tenure), Department of Internal Medicine, University of Michigan School of Medicine, Ann Arbor, MI.
06/2003 – present	Research Career Scientist, Center for Practice Management and Outcomes Research, VA Ann Arbor Health Care System, Ann Arbor, MI.
11/2005-present	Visiting Professor, Schools of Medicine and Nursing, Pontificia Universidad Católica, Santiago, Chile.
07/2007-present	Full Professor (with tenure), Department of Internal Medicine, University of Michigan School of Medicine, Ann Arbor, MI.
12/2009-present	Faculty Member, Center for Managing Chronic Disease, School of Public Health, University of Michigan, Ann Arbor, MI.
3/2010-present	Faculty Associate, Center for Global Health, University of Michigan, Ann Arbor, MI.

RESEARCH INTERESTS

- Interventional research to improve chronic disease management
- Cost-related medication adherence problems
- Global Health with a focus on Latin America
- Telephone care and health information technology
- Management of diabetes, depression, and heart failure

SCIENTIFIC ACTIVITIES

01/1998-12/1998	Member, Young Investigator Award Review Committee, Sierra Nevada VA Health Network.
05/2000	Ad Hoc Reviewer, U.S. Army Medical Research and Material Command (a research funding agency).
11/2000	Ad Hoc Reviewer, NIH Small Business Innovation Research/Technology Transfer Panel.
09/2000	Recognized by <i>Medical Care</i> as among the top 5% of outstanding reviewers.
05/1993–07/2001	Senior Research Associate, Program Evaluation Resource Center, VA Palo Alto Health Care System and Stanford University School of Medicine.
08/1996–07/2001	Member, Health Services Research Review Committee, VA Palo Alto Health Care System.
09/1998–07/2001	Faculty Associate, Center for Health Policy and Center for Primary Care and Outcomes Research, Stanford University.
06/2000–07/2001	Member, Research and Development Committee, VA Palo Alto Health Care System.
12/2001	Reviewer, 2002 Society for Behavioral Medicine Annual Meeting.
02/2001	Ad Hoc Reviewer, VA Cooperative Studies Program.

02/2002	Ad hoc Reviewer, NIH Health Services Research and Behavioral Medicine Study Section.
04/2002–09/2004	Member, American Diabetes Association Research Policy Committee.
05/2001– 08/2004	Member, Advisory Committee on Socioeconomic Status for the CDC-Funded study, “Translating Research into Action for Diabetes.”
01/2004-08/2005	Member, VA National Field Based Science Advisory Committee.
08/2005	Member, VA HSR&D Implementation Research Grant Review Panel.
10/2005	Reviewer, VA HS&D Annual Meeting Abstracts.
12/2002– 2007	Co-Investigator, Behavioral, Clinical and Health Systems Intervention Research Core, Michigan Diabetes Research and Training Center.
04/2004-08	Member, National Scientific Advisory Panel, VA Center of Excellence on Implementing Best Practices, Indianapolis, IN.
06/2004-	VA National Career Award Review Panel.
05/2005-2007	Chair, Behavioral Medicine and Psychology Council, American Diabetes Association.
05/2005-2006	Member, American Diabetes Association National Scientific Planning Committee.
09/2005-	Scientific Advisor, Fund for the Promotion of Scientific and Technological Development, Federal Government of Chile.
06/2006-	Director, VA/UM Research Program for Quality Improvement in Complex Chronic Conditions (QUICCC).
9/2007-	Member, National Scientific Advisory Panel, Providence Rhode Island VA REAP
5/2007-	Chair, Prevention and Control Division, Michigan Diabetes Research and Training Center.
01/2009-	Chair, VA National Research Interest Group on Caregiving
6/2009-	Scientific Advisor, National Health Insurance Institute for Government Employees (Instituto de Seguro Social de Salud para Trabajadores Estatales - ISSSTE), Mexico (12 million covered lives).
10/2009-	Member, National Scientific Advisory Panel, Denver Colorado VA REAP.

GRANT SUPPORT

Current Funding

Project Number:	IIR-07-185-1 (Piette)
Source:	VA HSR&D
Title of Project:	Enhancing Caregiver Support for Heart Failure Patients: The CarePartner Study
Dates of Project :	07/01/08 – 06/30/12
Annual Direct Costs:	\$220,020
Major Goals:	The purpose of the randomized trial is to evaluate the impact of extending the reach of health information technology by incorporating a protocol-driven model for improved monitoring and self-management support by a CarePartner (CP). The specific aims of the trial are: (1) to determine whether an intervention that uses automated patient monitoring and behavior change calls with follow-up to HF patients’ care manager and CP (HITCM+CP) improves key patient-centered outcomes relative to a system that only uses the same

technology to support patients' care management (HITCM-only). Outcomes of interest include patients' health-related quality of life, mental health, health service use, and mortality risk; (2) to evaluate the impact of HITCM+CP on patients' self-care behaviors compared to HITCM-only; and (3) to determine whether the intervention increases the quality and quantity of support for HF patients' self-care compared to HITCM-only.

Role: Principal Investigator

Overlap: None

Project Number: 1 UL1 RR 024986-02 (Clauw)

Title of Project: **Michigan Institute for Clinical and Health Research (MICHR)**

Dates of Project: 09/17/07 – 05/31/12

Annual Direct Costs: \$6,856,390

Major Goals: To provide infrastructure and support for clinical and translational research at the University of Michigan. Dr. Piette's role is to serve as the Co-Director of the Clinical Translation Program.

Role: Co-Investigator

Overlap: None

Project Number: RCS 03-155 (Piette)

Source: Health Services Research and Development Service, Department of Veterans Affairs

Title of Project: **VA Research Career Scientist Award**

Dates of Project: 1/1/04 – 12/31/16

Annual Direct Costs: \$145,051

Major Goals: The VA Research Career Scientist Program provides salary support for Ph.D. VA investigators who have demonstrated excellence in VA-relevant health services research. This award covers effort for performing research and research career development activities.

Role: Principal Investigator

Overlap: None

Project Number: 2 P60 DK020572 (Herman)

Source: National Institute of Diabetes Digestive and Kidney Disease

Title of Project: **Michigan Diabetes Research and Training Center**

Dates of Project: 12/1/02-11/30/12

Annual Direct Costs: \$227,376

Major Goals: The MDRTC is a university-wide network supporting collaborative research, training and consulting on diabetes-related research studies. The MDRTC includes three core groups (Behavioral, Clinical and Health Systems; Research Measurement and Methods; and Biostatistics). Dr. Piette will serve as the coordinator of activities within the Health Systems division of the BCHS core.

Role: Co-Investigator

Overlap: None

Project Number: **5 R18 DK066166-04 (Piette)**

Source: National Institute of Diabetes Digestive and Kidney Disease

Title of Project: **Effective Care and Management of Depressed Diabetes Patients**

Dates of Project:	5/1/05-4/30/10 (no cost time extension)
Annual Direct Costs:	\$415,725
Major Goals:	The purpose of this randomized trial is to evaluate the effectiveness of an intervention aimed at improving the care of patients with diabetes and comorbid depression (DM/D). DM/D patients will be randomized to: (a) enhanced usual care consisting of a written discussion of their depression screening results, an optional report to their primary care provider about the results, recommendations to seek follow-up care for their depressive symptoms, and information about diabetes self-care, depression management, and physical activity. Or (b) a telephone care management intervention consisting of medication management and cognitive behavioral therapy, focused on depressive symptoms and physical activity enhancement.
Role:	Principal Investigator
Overlap:	None
Project Number:	IIR 04-239 (Piette/Heisler)
Source:	Department of Veterans Affairs
Title of Project:	Telephone Peer Support for Insulin Management Among VA Diabetes Patients
Dates of Project:	4/1/06 – 3/31/10
Annual Direct Costs:	\$239,858
Major Goals:	This randomized trial will evaluate an intervention using an interactive voice response (IVR) exchange system to promote peer-to-peer communication among diabetes patients initiating or increasing insulin therapy under medical guidance. Specifically, the study will evaluate the effect of the IVR intervention on patients' glycemic control and patient centered treatment outcomes, and will identify the patient characteristics associated with participation and use of the IVR intervention.
Role:	Principal Investigator
Overlap:	None
Project Number:	
Source:	Michigan Institute for Clinical and Health Research – CTSA Pilot (Internal Funding)
Title of Project:	Identifying Untapped Informal Care Resources for Chronic Illness Self-Management Support
Dates of Project:	01/04/09-11/30/09
Total Direct Costs:	\$35,000
Major Goals:	The goal of the study is to provide essential information to support our new program of translational research designed to identify novel strategies for translating models of chronic disease self-management support into services that can help large numbers of community-dwelling patients with inadequate self-care.
Role:	Principal Investigator

Project Number: Peers for Progress (Tang)
 Source: Peers for Progress (Tang)
 Title of Project: **Peer-Led Self-Management Support in “Real World” Clinical and Community Settings**
 Dates of Project: 02/01/09 – 11/30/11
 Total Direct Costs: \$846,388
 Major Goals: This study will systematically evaluate a training program in state-of-the-art behavioral change approaches and facilitation skills for peer leaders and a peer-led diabetes self-management support program designed to be conducted in community and clinic-based settings on an ongoing basis.

Project Number: IIR 08-309
 Source: Health Services Research and Development Service, Department of Veterans Affairs
 Title of Project: **Web-based support for caregivers of veterans undergoing chemotherapy**
 Dates of Project: 10/1/09-9/30/13
 Annual Direct Costs: \$267,750
 Major Goals: Our goal is to determine if VA patients undergoing chemotherapy who receive automated telephonic symptom assessment (ATSA) and symptom management advice with provider alerts plus Web-based feedback to inform and engage a caregiver report significant improvement in the number and severity of symptoms compared to patients receiving monitoring with provider alerts only. Secondary patient outcomes include adherence to chemotherapy, function, and utilization.

Role: Co-Investigator
 Overlap: None

Pending Funding

Project Number: AHRQ
 Source: AHRQ
 Title of Project: **Trial of the CarePartner Program for Improving the Quality of Transition Support**
 Dates of Project: 10/01/10 – 9/30/13
 Total Direct Costs: \$304,168 (Yr 1 Only)
 Percent Effort: 1.368 UM CM and 1.032 VA Calendar Months (effort to be covered by VA Career Development Award)
 Major Goals: We will evaluate a novel intervention designed to improve the effectiveness of transition support for common chronic conditions via three mechanisms of action: (a) direct tailored communication of patients via regular automated calls post discharge, (b) support for informal caregivers within and outside of the patient's household via structured feedback about the patient's status and advice about how they can help, and (c) support for proactive care management including a web-based disease management tool, automated alerts about potential problems, and the capacity for asynchronous communication with patients and their caregivers. Specifically, the trial will determine: 1) whether the CarePartner intervention improves patients' readmission risk and functional status; 2) the impact of the intervention on patients' self-care behaviors and the

quality of the transition process; and 3) whether the intervention improves caregiver burden and stress levels.

Role: Principal Investigator

Overlap: None

Project Number:

Source: NIH R01 (Hawley/Katz)

Title of Project: **Racial/Ethnic Disparities in Decision Making and Quality of Life in Breast Cancer**

Dates of Project: 7/1/10-12/31/13

Annual Direct Costs: \$580,623

Major Goals: The major goals of this study are to evaluate racial/ethnic differences in decision making and quality of life outcomes in breast cancer patients, and to assess the impact of role demands and social support on these outcomes.

Role: Co-Investigator

Overlap: None

Project Number:

Source: NIH R01

Title of Project: **Improving Transition Outcomes through Accessible Health IT and Caregiver Support**

Dates of Project: 04/01/2011-03/16/2016

Annual Direct Cost: \$ 546,727

Percent Effort: 1.20 Calendar Months

Major Goals: Consistent with NIA's goals to improve transitions outcomes, we will evaluate a novel intervention designed to improve the effectiveness of transition support for older adults with common chronic conditions via three mechanisms of action: (a) direct tailored communication to patients via regular automated calls post discharge, (b) support for informal caregivers living outside of the patient's household via structured feedback about the patient's status and advice about how they can help, and (c) support for proactive care management including a web-based disease management tool, automated alerts about potential problems, and the capacity for asynchronous communication with patients and their caregivers. Specifically, the trial will determine: 1) whether the CarePartner intervention improves patients' readmission risk and functional status; 2) the impact of the intervention on patients' self-care behaviors and the quality of the transition process; and 3) whether the intervention improves caregiver burden and stress levels.

Role: Principal Investigator

Overlap: None

Past Funding

Source: Agency for Health Care Policy and Research

Title of Project: **Validation of the Turner Severity of Illness Classification System for HIV**

	Disease
Dates of Project:	5/01/91 – 4/30/92
Budget:	\$21,200
Major Goals:	The goal of this dissertation grant was to assess the validity and reliability of an HIV severity classification system. Medical record and patient interview data collected as part of the Robert Wood Johnson AIDS health services program were used to evaluate an algorithm for measuring patients' mortality risk and expected intensity of health service utilization.
Role:	Principal Investigator
Source:	Health Services Research and Development Service, Department of Veterans Affairs
Title of Project:	Predicting Inpatient Service Use Among Patients with Substance Abuse Disorders
Dates of Project:	10/01/95 – 4/30/97
Budget:	\$178,000
Major Goals:	The purpose of this study was to develop statistical models predicting inpatient service use by VA patients with substance abuse disorders. The study focused on the use of large databases as an information tool for program management and policy-making, and on the development of parametric survival analysis techniques as alternatives to the commonly-use proportional hazards model.
Role:	Principal Investigator
Source:	American Diabetes Association
Title of Project:	Automated Calls to Improve the Care of English- & Spanish-Speaking Diabetics
Dates of Project:	8/01/96 – 7/31/99
Budget:	\$209,600
Major Goals:	The purpose of this randomized trial was to examine the feasibility and efficacy of automated telephone calls with nurse follow-up as a strategy for improving the care of patients with non-insulin-dependent diabetes mellitus treated in public hospital clinics. The study focused on the impact of this service on outcomes for patients with poorly organized primary care and those who primarily speak Spanish.
Role:	Principal Investigator
Source:	Health Services Research and Development Service, Department of Veterans Affairs
Title of Project:	Automated Calls with Nurse Follow-up to Improve Diabetes Ambulatory Care
Dates of Project:	1/01/97 – 12/31/99
Budget:	\$427,100
Major Goals:	The purpose of this randomized trial was to evaluate the efficacy of automated telephone calls with nurse follow-up as a strategy for improving care of the patients with non-insulin-dependent diabetes mellitus.
Role:	Principal Investigator
Source:	Quality Enhancement Research Initiative, Department of Veterans Affairs

Title of Project: **Automated Telephone Assessment and Patient Education to Improve the Quality of Diabetes Care**
 Dates of Project: 5/01/99 – 4/30/03
 Budget: \$749,300
 Major Goals: The purpose of this study was to develop a patient-centered diabetes assessment system, evaluate its potential utility as a tool for the practice of population-based medicine, and evaluate the impact of automated assessments with physician feedback in a randomized trial. This is a multi-site study designed to build on our prior efficacy studies by determining the effectiveness of an enhanced version of the intervention in “real-world” settings.

Role: Principal Investigator

Source: Health Services Research and Development Service, Department of Veterans Affairs

Title of Project: **Benchmarking VA Diabetes Care by Participating in the CDC-Sponsored TRIAD Study**
 Dates of Project: 1/01/01 – 12/31/03
 Total Award: \$696,500
 Major Goals: The purpose of this study was to (1) examine and compare key processes and outcomes of diabetes care at VA facilities located in the same geographic areas as each of six non-VA managed care organizations participating in the CDC-sponsored TRIAD study (Taking Research Into Action for Diabetes); and (2) use a VA-wide survey of diabetes program characteristics to identify variations in the structure and organization of care associated with process and outcome quality measures.

Role: Co-Investigator

Source: Health Services Research and Development Service, Department of Veterans Affairs

Title of Project: **Can Interactive Voice Response Improve Patient-Centered Outcomes for Veterans?**
 Dates of Project: 5/1/00 – 4/30/04
 Total Award: \$700,590
 Major Goals: The purpose of this randomized trial was to determine whether using IVR to elicit diabetes and arthritis patients’ pre-visit expectations can improve the process and outcomes of their care. The primary endpoints are health-related quality of life and satisfaction with care; process measures include visit-specific communication, unmet expectations, and physician satisfaction; and secondary outcomes include quality of care and resource utilization.

Role: Co-Investigator

Source: Agency for Healthcare Research and Quality
 Title of Project: **Automated Assessments and the Quality of Diabetes Care**
 Dates of Project: 10/1/99 – 9/29/05
 Total Award: \$1,107,745
 Major Goals: The purpose of this study was to evaluate the measurement properties of automated assessments in support of primary care for patients with diabetes treated in a county health care system and a private managed care system.

Role:	Principal Investigator
Project Number:	
Source:	Geriatrics Center Pilot, Funded ½ by Hartford Foundation and ½ by Claude Pepper Foundation
Title of Project:	Using Electronic Pharmacy Fill and Refill Data to Understand and Promote Appropriate Medication Use among Elderly Diabetes Patients
Dates of Project:	8/1/05-7/31/06
Total Award:	\$40,801
Major Goals:	The major goal of this project is to develop the evidence base to inform an intervention to improve medications adherence and intensification among elderly diabetes patients. We will develop and validate electronic medical record and pharmacy-based algorithms providing information on elderly patients' refill adherence and clinician intensification of antihypertensive medications. We will also conduct analyses on factors that influence diabetes self-management and medications adherence to identify mediators and moderators for the intervention.
Role:	Co-Investigator
Project Number:	PY2384 (Lorig)
Source:	National Institute for Nursing Research
Title of Project:	A Spanish Diabetes Self-Management Program
Dates of Project:	6/1/02-5/31/07
Annual Direct Cost:	\$11,700
Major Goals:	The purpose of this study is to evaluate a community-based self-management education program for Spanish-speaking adults with type 2 diabetes. Patients will be randomized to six weekly mutual support meetings using a previously developed format. After receiving the intervention, patients will be re-randomized to ongoing reinforcement via automated phone calls or a no-reinforcement control.
Role:	Co-Investigator
Overlap:	None
Project Number:	RO1-DK066016-01 (Aikens)
Source:	National Institute of Diabetes Digestive and Kidney Disease
Title of Project:	Racial Differences in Diabetes-Depression Comorbidity
Dates of Project:	2/1/04-1/31/07
Annual Direct Costs:	\$12,544
Major Goals:	The aims of this study are to (1) evaluate a model associating depression and diabetes outcomes among African-American and Caucasian patients; and (2) identify the depression-related behaviors and beliefs that can inform a culturally-sensitive intervention for diabetes patients who have comorbid major depression.
Role:	Co-Investigator
Overlap:	None
Project Number:	
Source:	American Diabetes Association/VA

Title of Project: **Problems Due to Medication Costs Among People with Diabetes**
 Dates of Project: 2/15/05 – 2/14/08
 Annual Direct Cost: \$86,916
 Aims: This study will identify a large, racially diverse sample of socioeconomically disadvantaged diabetes patients (N=800) from an impoverished urban area (Flint, Michigan). Participants will complete a detailed interview about their medication cost pressures, how they cope with those pressures, and the types of assistance they have received from health care providers to address medication cost problems. Participants' glycemic control (A1c), cholesterol levels, blood pressure, and use of acute care will be assessed in order to determine the extent to which medication cost problems are impacting patients' health status.
 Role: Principal Investigator

Project Number: RO1-MH078698-03
 Source: National Institute of Mental Health (Valenstein)
 Title of Project: **Antidepressants, Concurrent Treatments and Completed Suicide in VA Registry Data**
 Dates of Project: 8/1/06 – 5/31/09*
 Annual Direct Costs: \$239,508
 Major Goals: Using data from the VA Depression Registry, we will evaluate differences in suicide rates and psychiatric hospitalizations among patients receiving alternative depression treatments, including: (a) different antidepressant drug classes; (b) different antidepressant augmentation strategies; (c) greater versus less continuity of care; and (d) medication management alone versus pharmacotherapy + psychotherapeutic counseling.
 Role: Co-Investigator *(effort ended 7/1/08)

Source: Blue Cross and Blue Shield of Michigan Foundation
 Title of Project: **Enhancing Caregiver Support for CHF Patients**
 Dates of Project: 9/1/06-8/31/08
 Annual Direct Costs: \$148,562
 Major Goals: The goal of this project is to develop and evaluate the feasibility of a novel service that promotes more effective heart failure care management by enhancing communication and effective self-management support among patients with chronic heart failure, their informal caregivers, and formal health care providers.
 Role: Principal Investigator

Project Number:
 Source: University of Michigan Geriatrics Center
 Title of Project: **Enhancing Caregiver Support for Chronically Ill Older Adults**
 Dates of Project: 09/01/06 -08/31/08
 Annual Direct Costs: \$37,507
 Major Goals: The specific aims of this study are: 1) to develop the software and communication content required for an automated phone and web-based system that supports effective communication between informal caregivers and chronically-ill older adults; 2) to evaluate the usability of the intervention and

system satisfaction among older adults with CHF or dementia and their caregivers; and 3) to produce an NIH application for a randomized trial evaluating the system's impact on patient-caregiver interactions, self-management, patient-centered outcomes, and caregiver outcomes.

Role: Principal Investigator

Overlap: None

Project Number:

Source: University of Michigan, Global REACH

Title of Project: **Developing & Evaluating Telephone Care Models for Diabetes Patients in Chile**

Dates of Project: 7/1/05-9/30/08

Annual Direct Costs: \$10,000

Aims: The purpose of this study is to support collaboration between Dr. Piette, the Chilean Ministry of Health, and research clinicians at Pontifica University in Santiago Chile. Dr. Piette is assisting the Chilean team in developing and evaluating a chronic illness care model that uses telephone care nurses to promote more effective disease management among patients with diabetes in the public health care system.

Role: Principal Investigator

Project Number: IIR 04-211 (Valenstein)

Source: VA Health Services Research and Development Program

Title of Project: **Depression Treatments and Suicide**

Dates of Project: 12/1/05 – 11/30/08

Annual Direct Costs: \$160,368

Aims: Using data from the VA Depression Registry, we will evaluate differences in suicide rates and psychiatric hospitalizations among patients receiving alternative depression treatments, including: (a) different antidepressant drug classes; (b) different antidepressant augmentation strategies; (c) greater versus less continuity of care; and (d) medication management alone versus pharmacotherapy + psychotherapeutic counseling.

Role: Co-Investigator

Project Number: 5 R01 HL085420-03 (Heisler)

Source: NHLBI

Title of Project: **Mobilizing Peer Support for Effective Congestive Heart Failure Self-Management**

Dates of Project: 08/01/06 – 04/30/10

Annual Direct Costs: \$369,215

Major Goals: This randomized trial will evaluate a six-month intervention that consists of group visits with CHF nurse managers in conjunction with a low-cost interactive voice response (IVR) telephone exchange system that promotes peer-to-peer communication and facilitates communication with care managers. The intervention is based on research on the positive impact of group visits and peer support on chronic disease outcomes and self-care behaviors, our own studies showing the effectiveness of IVR-based self-management supports, and a successful pilot study. The Specific Aims

are: 1) To evaluate the effect of group visits + IVR-facilitated peer support on CHF patients' health-related quality of life, survival, and rates of hospital readmission; 2) To assess the impact of the intervention on patients' self-management behaviors, use of guideline-concordant medications, perceived social support, depressive symptoms, and satisfaction with care; 3) To identify the mediating factors influencing the intervention's effectiveness; and 4) To determine the incremental cost-effectiveness of the intervention.

Role: Co-Investigator
Overlap: None

HONORS AND AWARDS

12/83	Hirschorn Foundation Award for Excellence in the Field of Speech Therapy (\$250).
04/92	Sigma Xi Outstanding Research Award. Presented by the Brown University Chapter.
09/97	Department of Veterans Affairs (VISN 21) Young Investigator Award (\$25,000).
02/98	Abstract of the Year Award. Presented at the 16 th Annual Department of Veterans Affairs Health Services Research and Development Meeting.
03/98	Society for Behavioral Medicine Diabetes Research Award (\$1,000). Presented at the 19 th Annual Meeting of the Society for Behavioral Medicine.
04/01	Department of Veterans Affairs Under Secretary for Health's Innovations Award (\$7,000).
07/03	Department of Veterans Affairs Research Career Scientist Award (full VA salary support for 5 years).
04/09	Blue Cross and Blue Shield of Michigan Foundation McDevitt Award for Excellence in Research on Health Policy.

MEMBERSHIPS IN PROFESSIONAL SOCIETIES

2002 - 2004	American Diabetes Association, Research Policy Committee Member
2001 -	Society for General Internal Medicine
2000 -	American Diabetes Association
05/2005	Member, Scientific Planning Committee, American Diabetes Association
05/2005-	Chair, Behavioral Medicine and Psychology Council, American Diabetes Association.

EDITORIAL POSITIONS, BOARDS, AND PEER-REVIEW SERVICE

Editorial Positions

08/2001-	Deputy Editor, <i>Medical Care</i>
11/2003-	Editorial Board member, <i>Journal of Chronic Illness</i>
12/2003-	Editorial Board member, <i>Diabetes Care</i>
09/2008-	Editorial Board Member, the <i>Open Diabetes Journal</i>
09/2008-	Editorial Board Member, the <i>Open Translational Research Journal</i>

Peer-Review Service

Ongoing	Reviewer, <i>American Journal of Managed Care</i> , <i>JAMA</i> , <i>Journal of Diabetes and</i>
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Its Complications, Journal of General Internal Medicine, Journal of Health Care for the Poor and Underserved, Journal of Research on Aging, Medical Care, Patient Education and Counseling, Quality of Life Research

TEACHING EXPERIENCE

- 1988 – 1992 Lecturer, Introduction to Epidemiology, Social and Health Services Program, Roger Williams University, Bristol, RI. (Responsible for semester-long course required for all Social and Health Services Administration degree candidates.)

- 1995 Lecture, Use of information technology to improve diabetes care. Department of Health Research and Policy, Stanford University School of Medicine, Stanford, CA, September 11, 1995.

- 1995 Lecture, Automated monitoring of patients' health status: Statistical issues in optimizing its clinical utility. Department of Statistics, Stanford University, Stanford, CA, November 9, 1995.

- 1994 – 1996 Co-Director, VA/Stanford University Health Services Research Writing Seminar, Stanford, CA. (Attended by RWJF Clinical Scholars and doctoral-level research trainees in other university and VA fellowships.)

- 1997 Lecture, Strategies for improving diabetes care for English- and Spanish-speaking patients in a county hospital. Primary Care Research Center, San Francisco General Hospital, San Francisco, CA, December 2, 1998.

- 1998 – 1999 Preceptor, Independent Study, Danielle Zipkin, B.S., 4th-Year Medical Student, University of California, San Francisco, CA. (Focused on evaluation of technology-assisted home monitoring for heart failure patients.)

- 1998 – 1999 Preceptor, Independent Study, Michelle Serlin, B.S., 4th-Year Medical Student, University of California, San Francisco, CA. (Focused on evaluation of technology-assisted home monitoring for heart failure patients.)

- 1999 Seminar Leader, Building chronic disease management interventions around multiple information technologies. Oregon Research Institute, Eugene, OR, April 12 – 13, 1999.

- 1999 Lecture, Improving the quality of diabetes care through systematic patient assessment between outpatient visits. Center for Primary Care and Outcomes Research, Stanford University, Stanford, CA. October 13, 1999.

- 1996 Supervisor, John McKeller, M.S., VA Psychology Department Intern, Health Services Research Rotation, Palo Alto, CA. (Focused on research into the role of psychiatric symptoms in diabetes management.)

- 2000 Preceptor, Lori Ybarra, Ph.D., VA/Stanford Postdoctoral Fellowship in Health Services Research, Palo Alto, CA. (Focused on the relationship between objective and subjective

measures of health status, and evaluation of diabetes home monitoring technologies.)

- 1999 – 2001 Preceptor, Jeanne Kemppainen, R.N., Ph.D., VA Postdoctoral Nursing Research Trainee.
- 1995 – 2001 Core-Preceptor and Selection Committee Member, VA Postdoctoral Fellowship in Medical Informatics, Palo Alto, CA. (Mentoring and training for a variety of physician trainees.)
- 1995 – 2001 Core-Preceptor and Selection Committee Member, VA/Stanford Predoctoral and Postdoctoral Fellowships in Health Services Research, Palo Alto, CA. (Mentoring and training for a variety of predoctoral and Ph.D. trainees.)
- 1996 – 2001 Faculty, Agency for Healthcare Research and Quality Predoctoral and Postdoctoral Fellowships in Health Care Research and Health Policy, Stanford University, Stanford, CA. (Mentoring and training for a variety of predoctoral and physician trainees.)
- 2000 – 2001 Preceptor, Laura Mancuso, M.A., Predoctoral Visiting Scholar from the Italian Multiple Sclerosis Society, Genoa, Italy, Patient Education Research Center, Stanford University, Stanford, CA. (Focus on research into self-efficacy and health distress as predictors of health outcomes, and the analysis of longitudinal data.)
- 1998 – 2001 Alumnae Mentor, Connie A. Mah, B.A., doctoral candidate, Department of Health Policy and Management, Harvard School of Public Health, Boston, MA.
- 2000 – 2005 Mentor, Dean Schillinger, M.D., NIH Mentored Clinical Scientist Development (K08) Awardee. (Focus primarily on research into the role of health literacy as a determinant of health behavior and health outcomes.)
- 2002 –2004 Dissertation Committee Member, Kelly Deal, M.P.H., Research Scientist, Durham VAMC and doctoral program in Health Policy and Management, University of North Carolina Chapel Hill School of Public Health.
- 2003-2004 Mentor, Helene Kales, M.D., Assistant Professor, Department of Psychiatry, University of Michigan, VA Career Development Awardee, and NIMH K-Grant Awardee.
- 2004-2006 Doctoral Dissertation Committee Member, Connie Mah, Department of Health Management and Policy, Harvard School of Public Health.
- 2002 – Primary Mentor, Caroline Richardson, M.D., Assistant Professor, Department of Family Medicine, University of Michigan and NHLBI K grant awardee, and Robert Wood Johnson Physician Scholar.
- 2002 – Faculty Mentor, Michele Heisler, M.D., Assistant Professor, Department of Internal Medicine, University of Michigan and VA Career Development Awardee.
- 2002 – Leader, Skills and Habits for Lifelong Learning, Department of Internal Medicine, University of Michigan. This is a four week series of seminars in evidence-based medicine taken by all 1st Year Internal Medicine residents during their Ambulatory Care rotation.

- 2002 – Leader, Evidence-Based Medicine Elective, Department of Medical Education, University of Michigan. This is a four-week intensive course in evidence-based medicine offered to 4th-year medical students.
- 2004- Faculty Mentor, Allison Rosen, M.D., Sc.D., Assistant Professor of Internal Medicine, University of Michigan and VA Career Development applicant.
- 2005- Mentor, G. Caleb Alexander, M.D., Assistant Professor of Medicine, University of Chicago, AHRQ K grant Awardee, and RWJF Clinical Scholar.
- 2007- Faculty Member, Robert Wood Johnson Clinical Scholars Program.
- 2007 - Jacob Kurlander, CTSA MD/MPH Program Mentor.
- 2008- MEND Lecture – Cost related medication adherence problems in diabetes.
- 2008-2009 Thesis Advisor and Epidemiology 659 Mentor, Evan Milton, UM School of Public Health.
- 2008- VA Career Development Transition Award Mentor, Chris Bryson, MD, Seattle, WA.
- 2009- Mentor, K-Award for Connie Mah-Trinacty, Ph.D., Harvard Medical School Department of Ambulatory Care and Prevention.
- 2009- Main Advisor, Laura Chess, UM School of Public Health General Epidemiology Summer Internship project in Honduras (\$3540 award).
- 2009- Main Advisor, Olga Semanova, UM School of Public Health Health Behavior and Health Education Population Planning Summer Internship in Honduras (\$1000 scholarship from the SPH, \$2655 scholarship from the SPH Global Health Internship Fund, and \$1000 scholarship from the UM Graduate Global Health Travel Fellowship).
- 2009- Doctoral Dissertation Advisor: Huang-Tz (Anita) Ou, M.S., Ph.D. Candidate, University of Michigan College of Pharmacy, Department of Clinical, Social, and Administrative Sciences.
- 2009- Doctoral Dissertation Advisor: Chung-Hsuen (Alvin) Wu, M.S., Ph.D. Candidate, University of Michigan College of Pharmacy, Department of Clinical, Social, and Administrative Sciences.
- 2010- Faculty Mentor and VA CDA Applicant: Ranak B. Trivedi, M.D. Seattle VA Center of Excellence and University of Washington School of Medicine.
- 2010- Main Mentor and VA CDA Applicant: Ann Marie Rosland, M.D. Ann Arbor VA Center of Excellence and University of Michigan School of Medicine.

COMMITTEE, ORGANIZATIONAL, AND VOLUNTEER SERVICE

02/1997	Planning Committee Chair, The 15 th Annual VA Health Services Research and Development (HSR&D) Meeting, Washington, DC, February 13 – February 15.
1995 – 2001	Hiring Committee Member for Senior Research Associates, Center for Health Care Evaluation & Program Evaluation Resource Center, VA Palo Alto Health Care System and Stanford University School of Medicine.
1996 – 2001	Member, Health Services Research Review Committee, VA Palo Alto Health Care System.
2000 – 2001	Member, Research and Development Committee, VA Palo Alto Health Care System.
11/2001	Invited Participant, California Health Literacy Initiative Task Force, Burlingame, CA, November 12-13.
2002 – 2003	Member, Michigan Diabetes Research and Training Center Small Grants Review Panel.
2002 – 2004	Member, American Diabetes Association Research Policy Committee.
01/2004-08/2005	Member, VA National Field Based Science Advisory Committee.
09/2001 – 2006	Deputy Editor, <i>Medical Care</i> .
2003 -	VA Center for Practice Management and Outcomes Research, Hiring and Promotions Committee.
11/2003-	Editorial Board member, <i>Journal of Chronic Illness</i> .
01/2004 - 2006	Editorial Board member, <i>Diabetes Care</i> .
04/2004-	Member, National Scientific Advisory Panel, VA Center of Excellence on Implementing Best Practices, Indianapolis, IN.
06/2004-	VA National Career Award Review Panel.
09/2004-	Director, VA/UM Program for Quality Improvement in Complex Chronic Conditions (QUICCC).
05/2005-2007	Chair, Behavioral Medicine and Psychology Council, American Diabetes Association.
0/1/2006-	Member, Michigan Diabetes Research and Training Center Pilot Grant Review Panel.
05/2005-2007	Member, National Scientific Advisory Panel, American Diabetes Association.
06/2005-	Member, Division of General Medicine Research Council
06/2005-2006	Member, Department of Geriatrics Faculty Search Committee.
04/2006-	Member, VA Career Development Award Review Panel
05/2008-	Member, UM Department of Internal Medicine Faculty Evaluation Committee.
05/2008-	Member, Planning Committee for 2009 VA National Meeting and Abstract Review Committee Chair.
01/2009-	Member, VA Patient Care Services National Working Group on Caregiving
01/2009	Chair, VA National Special Interest Group on Caregiving Research
04/2009-	Member, Washtenaw County Spanish Healthcare Outreach Collaborative

CONSULTING POSITIONS

10/2001– 12/2003	Consultant, American Academy of Family Practice-funded study on the use of pharmacy claims- based medication adherence reports to assist physicians in identifying and intervening with non-adherent patients taking hypoglycemic agents.
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2004 - Mechanism of Physical Activity Behavior Change. NIH-funded randomized trial being conducted by investigators at Kaiser Permanente, Denver, CO.

VISITING PROFESSORSHIPS, SEMINARS, AND EXTRAMURAL INVITED PRESENTATIONS

Extramural Invited Presentations - International

02/1999	Telephone-based interventions in diabetes. The 13 th Invitational Conference on Behavioral Research in Diabetes, Acapulco, Mexico.
11/2000	Computers in diabetes education. The 17 th International Diabetes Federation Congress, Mexico City, Mexico.
08/2003	Improving diabetes care through interactive health technology. International Diabetes Federation Annual Meeting, Paris, France.
08/2004	Medication adherence problems due to cost pressures: a research agenda. Center for Health Care Research, University of Brighton, UK.
05/2005	Developing a telephone care program for diabetes patients in Chile. Universidad Catolica, Santiago, Chile.
09/2005	Automated telephone support for chronic illness care: a critical review of the evidence: The University of Ottawa and Ottawa Health Research Institute, Ottawa, Canada.
07/2007	Estrategias que facilitan el autocuidado de enfermedades crónicas: telecuidado, cuidadores informales y apoyo de pares en Chile y a través de América Latina. [Strategies that facilitate self-care of chronic disease: telecare, informal caregivers and peer support in Chile and across Latin America]. 1 st National Public Health Conference of Chile.
07/2007	Enfrentando los desafíos para la implementación en el mundo real. [Addressing the challenges to implementation in the real world.] 1 st National Public Health Conference of Chile.
08/2007	Out-of-pocket costs and chronic illness self-care: helping patients cope. National Healthcare Group, Singapore.
08/2007	Diabetes and depression. National Healthcare Group, Singapore.
03/2008	Strategies for Establishing Programs of Chronic Illness Care in Mexico. Presented at the Carso Institute, Mexico City, Mexico.
04/2008	(3 invited talks including a plenary): Literacidad en Salud (Health Literacy); El Model de Cuidados Crónicos (the Chronic Care Model); Avances en Telecuidado (Advances in Telephone Care). 2 nd International Conference on Self-Care and Health Promotion,

Santiago de Chile.

- 09/2008 A Systems Approach to Medication Adherence Support. 12th Meeting of the European Society for Patient Compliance and Adherence, Basel, Switzerland.
- 10/2008 Enlaces Entre La Diabetes y La Depresión [*Links Between Diabetes and Depresión.*] Meeting of the Mexican Association of Diabetes Professionals, Mexico City, Mexico.
- 10/2008 La Diabetes y La Depresión – Conexiones y Caminos Hasta el Manejo Efectivo. Nacional Diabetes Conference, Mexico City, Mexico.
- 6/2009 Estrategias para Mejorar el Cuidado de Pacientes con Enfermedades Crónicas [*Strategies for Improving the Care of Patients with Chronic Illnesses*] Instituto de Seguridad y Servicios Sociales de los Trabajadores del Estado, Colima, Mexico.
- 10/2009 Strategies for Diabetes Screening in Latin America. Instituto de Seguro Social de Salud para los Trabajadores Estatales (ISSSTE), Mexico City, Mexico.
- 11/2009 Functional Health Literacy in Diabetes. International Diabetes Federation Congress, Montreal Canada.
- 12/2009 An International Approach to Improving Heart Failure Management through Supporting Patients, Clinicians and Informal Caregivers. BIT Annual International Cardiology Congress of 2009, December 5-7, Shanghai, China.
- 3/2010 Improving Chronic Illness Care in Honduras. Yojoa International Medical Center, March 23, 2010, Santa Cruz De Yojoa, Honduras.

Extramural Invited Presentations - National

- 10/1998 Promises and pitfalls of disease management. The 1998 Meeting of the Northern California Region of the American College of Physicians/Society for General Internal Medicine, San Francisco, CA.
- 08/1999 Use of automated telephone assessments to inform clinical decision-making and monitor treatment from the patient perspective. Department of Internal Medicine, UCLA School of Medicine, Los Angeles, CA.
- 06/1999 Advances in behavioral medicine: Applications of computer technologies. The 59th Scientific Sessions of the American Diabetes Association, San Diego, CA.
- 06/2000 Interactive computers to motivate behavior change: New data and lessons learned. The 60th Scientific Sessions of the American Diabetes Association, San Antonio, TX.
- 02/2000 Do automated assessments with telephone nurse follow-up improve diabetes treatment outcomes? Center for Health Services Research in Primary Care, University of California at Davis, Davis, CA.

05/2000	Population-based diabetes care. Department of Internal Medicine, University of California at San Diego, San Diego, CA.
02/2001	How can managed care organizations best utilize telemedicine? Group Health Cooperative, Seattle, WA.
03/2001	Implementing new health information technologies in VA. VA National Diabetes Symposium, Alexandria, VA.
09/2002	Integration of self-management and practice. RWJF/AHRQ Congress on Improving Chronic Care: Innovations in Research and Practice, Seattle, WA.
12/2002	Health technology and chronic illness care. Meeting of the National Academy for State Health Policy, Philadelphia, PA.
08/2003	Integrating automated telephone monitoring into chronic illness care within the Kaiser Permanente System, Denver CO.
10/2003	Ghosts and goblins in randomized trials. Brown University Department of Community Health, Providence, RI.
12/2003	Informatics strategies to support healthcare quality improvement. VA National QUERI Meeting, Washington DC.
06/2004	Interventions to assist diabetes patients with health literacy problems. American Diabetes Association National Meeting. Orlando, FL.
08/2004	Health literacy and diabetes: and now for the good news. Meeting of the American Association of Diabetes Educators (Plenary Presentation). Indianapolis, IN.
12/2005	A framework for understanding telephone care interventions. Department of Ambulatory Care and Prevention, Harvard Medical School, Cambridge, MA.
05/2007	Innovation in chronic illness care for older adults: principals that can promote progress worldwide. Workshop on the Social Determinants of Adult Health and Mortality, National Academy of Sciences, Washington, DC.
09/2007	Interventions to address racial and ethnic disparities in diabetes care. Vanderbilt University, Nashville, TN.
10/2007	Advances in telecare interventions for VA: research and service improvement opportunities. VA Medical Center, Minneapolis, MN.
05/2008	Developing Innovation in Chronic Illness Care in Michigan. Diabetes & Kidney Disease Unit, Michigan Department of Community Health, Lansing, MI.
05/2008	Notes from Flint: What Michigan Diabetes Patients are Saying About Their Medication Costs. Diabetes Partners in Action Conference, Lansing, MI.
07/2008	Opportunities for Improving Chronic Illness Care in the VA. Brown University School

of Medicine and Providence VA Healthcare System, RI.

- 10/2008 Interventions to Improve Chronic Illness Care. New York University, New York City, NY.
- 10/2008 Improving Chronic Illness Care in Community Practices in Michigan. Michigan State Medical Society, Lansing, MI.
- 05/2009 Advances in Healthcare for Spanish-Speakers in Michigan. Michigan State Commission on Spanish-Speaking Affairs, Ann Arbor, MI.
- 09/2009 Addressing Disparities in Chronic Illness Care When the Money Runs Out. Department of Medicine, University of Chicago, Chicago, IL.
- 11/2009 The CarePartner Model for Disease Management Support. 5th Annual World Health Innovations and Technology Congress, Alexandria, VA.
- 4/2010 Esablecimiento de Programas de Telemedicina en Americalatina. [*Establishing Telemedicine Programs in Latin America*]. Yojoa International Medical Center, Santa Cruz de Yojoa, Honduras.
- 6/2010 Investigación en atención en salud sobre las enfermedades crónicas con uso de la Tecnologías de la Información y la Comunicación [*Research on Health Care for Chronic Conditions Using Information Technology*]. National University of Colombia, Bogota, June 18, 2010.
- 6/2010 Health literacy: what clinicians can do in the context of a brief visit. Michigan Physician Group Incentive Program Meeting, June 23, 2010, Trinity Healthcare, Ypsilanti, MI.

Other Presentations – International

- 04/2003 Heisler M, Langa K, Fendrick AM, Piette JD. The health effects of restricting prescription medication use due to cost. Meeting of the Society for General Internal Medicine, Vancouver, BC.
- 04/2003 Piette JD, Wagner T, Potter M, Schillinger D. Health insurance status, medication self-restriction due to cost, and outcomes among diabetes patients in three systems of care (Plenary Presentation). Meeting of the Society for General Internal Medicine, Vancouver, BC.
- 04/2003 Piette JD, Potter M, Schillinger D, Heisler M. Dimensions of patient-provider communication and diabetes self-care in an ethnically-diverse population. Meeting of the Society for General Internal Medicine, Vancouver, BC.
- 04/2003 Schillinger D, Bindman AB, Stewart A, Wang F, Piette D. Functional health literacy and the quality of physician-patient communication. Meeting of the Society for General Internal Medicine, Vancouver, BC.
- 11/2010 Huang Tz Out, Piette JD, Balkrishnan R. Performance of comorbidity measures in health care related behaviors and outcomes in type 2 diabetes. 13th Annual European

ISPOR Conference, Prague, Czech Republic.

Other Presentations – National

- 02/1996 Mah CA, Piette JD, Kraemer FB, McPhee SJ. The feasibility of automated voice messaging as an adjunct to diabetes outpatient care. Department of Veterans Affairs 14th Annual HSR&D Service Meeting, Washington, DC.
- 06/1996 Piette JD, Olshen RA, Mah CA. Clinical application of automated voice messaging: Statistical strategies for developing effective protocols. American Medical Informatics Association Spring Congress, Kansas City, MO.
- 05/1997 Piette JD, Mah CA. Moving chronic disease management from clinic to community: Development of a prototype based on automated voice messaging (AVM). American Medical Informatics Association Spring Congress, San Jose, CA.
- 02/1998 Piette JD, Mah CA, Alvarez E, Amboy D, Gangitano C, Turner D. Will VA diabetic patients respond to automated telephone disease management (ATDM) calls? Department of Veterans Affairs 16th Annual HSR&D Service Meeting, Washington, DC.
- 03/1998 Piette JD, Mah CA, Gangitano CA. Will diabetics use automated telephone disease management? Society of Behavioral Medicine 19th Annual Scientific Sessions, New Orleans, LA.
- 05/1998 Piette JD, Mah CA, Crapo L, McPhee SJ. Reports by diabetic patients using automated telephone disease management calls: Concordance with data from medical records, laboratory tests, and interviews. The 58th Scientific Sessions of the American Diabetes Association, Chicago, IL, June 13 – 16, 1998. Also presented at the Agency for Health Care Policy and Research/American Association of Health Plans 1998 Building Bridges Research Conference, Oakland, CA.
- 06/1998 Piette JD. Automated voice messaging as an adjunct to outpatient diabetes care. The 58th Scientific Sessions of the American Diabetes Association, Chicago, IL.
- 06/1998 Mah CA, Piette JD, Gangitano C, Turner D. Do diabetic patients report health problems accurately during automated telephone calls? The 58th Scientific Sessions of the American Diabetes Association, Chicago, IL.
- 06/1998 Piette JD, McPhee SJ. Preventive services, health status, and satisfaction with care among diabetic patients treated in two publicly-funded health care systems. The 15th Annual Meeting of the Association for Health Services Research, Washington, DC. Also presented at the 58th Scientific Sessions of the American Diabetes Association, Chicago, IL.
- 06/1998 Piette JD, Mah CA, McPhee SJ. Reports by diabetic patients using automated disease management calls: Concordance with clinical data, patient surveys, and nurse follow-up calls. The 15th Annual Meeting of the Association for Health Services Research, Washington, DC.

- 02/1999 Piette JD. Access to care among adults with diabetes in VA and county clinics. The 17th Annual VA Health Services Research and Development (HSR&D) Meeting, Washington, DC.
- 06/1999 Piette JD, Weinberger M, McPhee SJ, Crapo LM, Kraemer FB, Mah CA, Alvarez EO, Amboy DJ, Gangitano C. Automated calls with nurse follow-up improve diabetes self-care and glycemic control. The 59th Scientific Sessions of the American Diabetes Association, San Diego, CA.
- 06/1999 Piette JD, Weinberger M, McPhee SJ, Crapo LM, Kraemer FB, Mah CA, Alvarez EO, Amboy DJ, Gangitano C. The impact of automated calls with nurse follow-up on patient-centered outcomes of diabetes care. The 59th Scientific Sessions of the American Diabetes Association, San Diego, CA.
- 06/1999 Piette JD. The impact of automated calls with nurse follow-up on patient-centered outcomes of diabetes care. The 16th Annual Meeting of the Association for Health Services Research, Chicago, IL.
- 06/1999 Piette JD. The clinical impact of automated calls with nurse follow-up among vulnerable patients with diabetes. The 16th Annual Meeting of the Association for Health Services Research, Chicago, IL.
- 09/1999 Nanevycz TM, Piette JD, Zipkin DA, Serlin MC, Ennis SC. Feasibility of a home telemonitoring system for prevention of congestive heart failure exacerbation. The 3rd Annual Scientific Meeting of the Heart Failure Society of America, San Francisco, CA.
- 03/2000 Piette JD, Weinberger M, McPhee SJ. Do automated calls with nurse follow-up improve outcomes among VA patients with diabetes? A randomized controlled trial. The 18th Annual VA Health Services Research and Development (HSR&D) Meeting, Washington, DC.
- 02/2001 Piette JD. What are the health consequences of access problems experienced by diabetics? The 19th Annual VA Health Services Research and Development (HSR&D) Meeting, Washington, DC.
- 03/2001 Mancuso L, Piette JD, Lorig KR. The long term influence of self-efficacy and health distress on chronically ill patients treatment outcomes. The 22nd Annual Meeting of the Society for Behavioral Medicine, Seattle, WA.
- 05/2001 Schillinger D, Piette JD, Daher C, Liu H, Bindman AB. Should we be screening for functional health literacy problems among patients with diabetes? Meeting of the Society for General Internal Medicine, San Diego, CA.
- 05/2001 Schillinger D, Piette JD, Leong-Grotz K, Wilson C, Grumbach K. Missed opportunities in physician-patient communication with type 2 diabetes patients who have health literacy problems. Meeting of the Society for General Internal Medicine, San Diego, CA.

- 05/2002 Goldberg LR, Piette JD, Walsh TA, Frank TA, Jaski B, Smith AL, et. al. Impact of the AlereNet monitoring system on outcomes among patients with decompensated heart failure. Meeting of the Society for General Internal Medicine, Atlanta, GA. Abstract published in the *Journal of General Internal Medicine* 2002;17(suppl 1):194.
- 05/2002 Schillinger D, Grumbach K, Piette JD, Wang F, Osmond D, Daher C, Palacios J, et. al. Association of functional health literacy with glycemic control among diabetes patients. Meeting of the Society for General Internal Medicine, Atlanta, GA. Abstract published in the *Journal of General Internal Medicine* 2002;17(suppl 1):167.
- 09/2002 Goldberg LR, Piette JD, Walsh MN, Frank TA, Jaski BE, Smith AI, Rodriquez R, Mancini DM, Hopton LA, Orav EJ, Loh E. A daily electronic home monitoring system in patients with advanced heart failure improves survival: The WHARF (Weight Monitoring in Heart Failure) Trial. *Journal of Cardiac Failure* 2002;8(4):S54. The 6th Annual Scientific Meeting of the Heart Failure Society of America, Boca Raton, FL.
- 02/2003 Piette JD, Wagner TH, Schillinger D, Potter M, Jain S, Krahn D. Medication self-restriction due to cost among diabetes patients in VA and non-VA systems of care. The Annual VA Health Services Research and Development (HSR&D) Meeting, Washington, DC.
- 02/2003 Bingham CR, Piette JD. The effects of depression on patient-provider communication, illness self-care and lifestyle behaviors among diabetes patients. The Annual VA Health Services Research and Development (HSR&D) Meeting, Washington, DC.
- 02/2003 McCarthy J, Blow F, Fortney J, Piette JD. Clinic visit stacking as a response to distance barriers among VA patients with psychoses. The Annual VA Health Services Research and Development (HSR&D) Meeting, Washington, DC.
- 03/2004 Krien, SL, Heisler M, Piette JD, Makki F, Kerr EA. Chronic pain and self-management among veterans with diabetes. The Annual VA Health Services Research and Development (HSR&D) Meeting, Washington, DC.
- 05/2004 Kim C, Eby E, Piette JD. Does the association between socioeconomic status and cause-specific mortality vary by race? An examination of cardiovascular disease and breast cancer mortality among African-American and white women. Meeting of the Society for General Internal Medicine, Chicago, IL. *Journal of General Internal Medicine* 2004;19(suppl 1):146.
- 05/2004 Heisler M, Piette JD, Kieffer EC, Spencer MS, Vijan S. Knowledge of most recent hemoglobin A1c values among adults with diabetes: prevalence and correlates. Meeting of the Society for General Internal Medicine, Chicago, IL. *Journal of General Internal Medicine* 2004;19(suppl 1):172.
- 05/2004 Kerr EA, Gerzoff R, Krein SI, Selby JV, Piette JD, et. al. A comparison of diabetes care quality in VA and commercial managed care: The TRIAD Study. Meeting of the Society for General Internal Medicine, Chicago, IL. *Journal of General Internal Medicine* 2004;19(suppl 1):109.

- 05/2004 Piette JD, Heisler M, Wagner TH. Cost-related medication under-use: an analysis of tough choices by chronically-ill adults. Meeting of the Society for General Internal Medicine, Chicago, IL. *Journal of General Internal Medicine* 2004;19(suppl 1):133.
- 05/2004 Piette JD, Bibbins-Domingo K, Schillinger D. Self-reported health care discrimination, interpersonal processes of care, and health status among patients with diabetes. Meeting of the Society for General Internal Medicine, Chicago, IL. *Journal of General Internal Medicine* 2004;19(suppl 1):210.
- 02/2005 Heisler M, Piette JD. "I Help You, and You Help Me": the feasibility and acceptability of technology-facilitated telephone peer support among diabetes patients. National VA HSR&D Meeting, Baltimore, MD. Also presented at the 2005 Meeting of the Society for General Internal Medicine, New Orleans, LA.
- 05/2005 Piette JD. Strategies for assisting patients with medication cost problems. Meeting of the Society for General Internal Medicine, New Orleans, LA.
- 06/2006 Wagner TH, Heisler M, Piette JD. Tiered co-payments and cost-related medication underuse. Meeting of the American Society of Health Economists.
- 02/2006 Piette JD, Stroupe K, Maciejewski M, Rosen A. The impact of prescription drug co-payments on the care and outcomes of chronically-ill veterans (workshop). The 24th Annual VA Health Services Research and Development (HSR&D) Meeting, Washington, DC.
- 02/2006 Heisler M, Zemencuk J, Krein S, Hayward R, Piette JD, Kerr E. Racial disparities in diabetes care processes, outcomes and treatment intensity. The 24th Annual VA Health Services Research and Development (HSR&D) Meeting, Washington, DC.
- 02/2006 Piette JD, Heisler M, Ganoczy McCarthy J, Valenstein M. Differential medication adherence among veterans with multiple chronic illnesses. The 24th Annual VA Health Services Research and Development (HSR&D) Meeting, Washington, DC.
- 02/2006 McCarthy J, Piette JD, Valenstein M, Craig T, Blow F. No-shows among patients with serious mental illness: transportation matters. The 24th Annual VA Health Services Research and Development (HSR&D) Meeting, Washington, DC.
- 02/2006 Krein S, Heisler M, Piette JD, Butchart A, Kerr E. Does self-efficacy mediate the influence of chronic pain on patients' self-care adherence? The 24th Annual VA Health Services Research and Development (HSR&D) Meeting, Washington, DC.
- 03/2007 Richardson C, Janney A, Fortlage L, Piette JD. The effect of goal-setting strategies on bout-step count in type 2 diabetes. Society for Behavioral Medicine Annual Meeting, Washington, DC.
- 03/2008 Warren G, Heisler M, Perry E, Ferriter M, Piette J, Magee J. Telephone peer mentoring: a new approach to improving access to kidney transplantation. National Kidney

Foundation Annual Meeting, Nashville, TN.

- 02/2009 Piette JD. Emerging research on caregiving. VA HSR&D National Meeting, Baltimore, MD.
- 05/2009 Kurlander JE, Kerr EA, Krein SL, Heisler M, Piette JD. For patients with diabetes and chronic pain, mood and medication beliefs influence choices about medication underuse in the context of cost pressures. Meeting of the Society for General Internal Medicine, Miami, FL.
- 05/2009 Piette JD. Research on Chronic Illness Care in Latin America. Meeting of the Society Internal Medicine, Miami, FL.
- 05/2009 Rosland A, Piette JD, Heisler M. Incorporating family members into chronic disease clinical care. Meeting of the Society Internal Medicine, Miami, FL.
- 05/2009 Kerr EA, Holleman R, Piette JD, Krisn SL, Hofer TP. Achievement of blood pressure control targets at a single visit does not adequately reflect quality of antihypertensive care. Meeting of the Society Internal Medicine, Miami, FL.
- 05/2009 Bryson CL, Au DH, Blough DK, Fihn SD, Jackson GL, Piette JD, Maciejewski ML, Perkins MW, Sharp ND, Liu C. Facility level variation in adherence to oral diabetes medications in the VA. Meeting of the Society Internal Medicine, Miami, FL.
- 05/2009 Gure TR, Lee Y, Langa KM, Piette JD. The association between social support and blood pressure control among older hypertensive adults. Annual Meeting of the American Geriatrics Society, April 24-27, 2009.
- 04/2010 Heisler M, Vijan S, Makki F, Piette JD. A reciprocal peer support intervention improves glycemic control better than usual nurse case management among diabetes patients with poor glycemic control. Annual Meeting of the Society for General Internal Medicine, April 28-May 1, 2010, Minneapolis, MN.
- 04/2010 Piette JD, Himle J, Torres T, Vogel M, Duffy S, Richardson C, Valenstein M. 12-month outcomes from a randomized trial of telephone cognitive behavioral therapy for depressed patients with type 2 diabetes. Annual Meeting of the Society for General Internal Medicine, April 28-May 1, 2010, Minneapolis, MN.
- 04/2010 Rosland A, Piette JD, Choi H, Heisler M. Family participation in primary care clinical visits of patients with diabetes or heart failure: patient satisfaction and physician concerns. Annual Meeting of the Society for General Internal Medicine, April 28-May 1, 2010, Minneapolis, MN.
- 04/2010 Milton E, Aiello A, Mendoza M, Matiz-Reyez A, Herman W, Piette JD. Comparison of three methods for diabetes screening in rural clinics in Honduras. Annual Meeting of the Society for General Internal Medicine, April 28-May 1, 2010, Minneapolis, MN.
- 04/2010 Chess L, Milton E, Aiello A, Mendoza M, Matiz-Reyez A, Piette JD. Remittance

payments to people with chronic diseases in Honduras. Annual Meeting of the Society for General Internal Medicine, April 28-May 1, 2010, Minneapolis, MN.

- 04/2010 Bryson CL, Au D, Blough D, Fihn SD, Jackson ML, Maciejewski ML, Piette JD, Perkins MW, Sharp ND, Liu C. Patient factors do not explain large facility variation in medication adherence. Annual Meeting of the Society for General Internal Medicine, April 28-May 1, 2010, Minneapolis, MN.
- 04/2010 Rosland A, Heisler M, Connell C, Janevic M, Langa K, Piette JD. Untapped resources for family support for chronic illness self-care: a national study. Annual Meeting of the Society for General Internal Medicine, April 28-May 1, 2010, Minneapolis, MN.
- 11/2010 Richardson C, Piette JD. An online community reduces attrition in an Internet-mediated walking program. Meeting of the American Public Health Association, November 6-10, Denver Colorado.

Other Presentations – University of Michigan

- 11/2003 Cost-related medication under use among chronically ill adults: results of an internet-based survey. Institute for Social Research, Ann Arbor, MI.
- 05/2003 Clinic visit stacking as a response to distance barriers among VA patients with psychoses. Fourteenth Annual Albert J. Silverman Conference, Ann Arbor, MI.

BIBLIOGRAPHY

Peer-Reviewed Publications

1. Mor V, Piette J, Fleishman JA. Challenges to implementation: Community-based care for persons with AIDS. *Health Affairs* Winter 1989;139-153.
2. Fleishman JA, Piette J, Mor V. Organizational response to AIDS. *Evaluation and Program Planning* 1990;13:31-38.
3. Piette J, Fleishman JA, Dill A, Mor V. A comparison of hospital and community case management programs for persons with AIDS. *Medical Care* 1990;28:746-755.
4. Stein M, Piette J, Mor V, Wachtel TJ, Fleishman J, Mayer KH, Carpenter C. Differences in access to azidothymidine (AZT) among symptomatic HIV-infected persons. *Journal of General Internal Medicine* 1991;6:35-40.
5. Piette J, Mor V, Fleishman JA. Patterns of survival with AIDS in the United States. *Health Services Research* 1991;26:75-95.
6. Piette J, Stein M, Mor V, Fleishman JA, Mayer K, Wachtel T, Carpenter C. Patterns of secondary prophylaxis with aerosol pentamidine among persons with AIDS (letter). *Journal of Acquired Immune Deficiency Syndromes* 1991;4:826-828.
7. Capilouto EI, Piette J, White BA. Perceived need for dental care among persons living with acquired immunodeficiency syndrome. *Medical Care* 1991; 29:745-754.
8. Fleishman JA, Mor V, Piette J. AIDS case management: The client's perspective. *Health Services Research* 1991;26:447-478.
9. Mor V, Fleishman JA, Dresser M, Piette J. Variation in health service use among HIV infected patients. *Medical Care* 1992;30:17-29.

10. Piette J, Fleishman JA, Mor V, Thompson B. The structure and process of AIDS case management. *Health and Social Work* 1992;17:47-56.
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Articles Accepted for Publication

1. Gure TR, Plassman BL, Piette JD, Langa KM. Disability among older adults who have cognitive impairment without dementia. *Journal of the American Geriatrics Association*, in press.
2. Tseng CW, Waitzfelder BE, Tierney EF, Gerzoff RB, Marrero DG, Piette JD, Karter AJ, et al. Patients' willingness to discuss trade-offs to lower their out-of-pocket drug costs. *Archives of Internal Medicine*, in press.
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8. Pfeiffer P, Heisler M, Piette JD, Valenstein M. Efficacy of peer support interventions for depression: a meta-analysis. *General Hospital Psychiatry*, in press.

Articles Under Review

1. Richardson CR, Buis LA, Janney AW, Sen AS, Hess ML, Fortlage LA, Resnick PJ, Zikmund-Fisher BF, Strecher VJ, Piette JD. Adding an online community to an internet-mediated walking program improves program retention: a randomized trial.
2. Heisler M, Choi HJ, Piette JD, Rosland AM, Langa KM, Brown S. Prospective health outcomes among adults with diabetes who reported providing non-resident support to family, friends, or neighbors compared to those who did not provide support.
3. Piette JD, Rosland AM, Silveira MJ, Hayward R. Cost-related medication underuse: Did the financial crisis make a bad situation even worse?
4. Krein SL, Metreger T, Kadri R, Hughes M, Kerr E, Piette JD, Kim M, Richardson R. Veterans Walk to Beat Back Pain: Study rationale, design, and protocol of a randomized trial of a pedometer-based Internet mediated intervention for patients with chronic low back pain.
5. Trivedi R, Piette JD. Examining the inter-relatedness of patient and spousal stress in heart failure: conceptual model and preliminary data.
6. Adams AS, Lu M, Parker M, Moffett H, Schillinger D, Adler N, Fernandez A, Piette JD, Karter AJ. Variations in patient symptom reporting and analgesic use within a multi-ethnic cohort of diabetes patients with chronic pain.

7. Ou HT, Erickson SR, Mukerjee B, Piette JD, Bagozzi RP, Balkrishnan R. Comparative performance of four comorbidity indices in predicting healthcare processes among Medicaid enrollees with type 2 diabetes.
8. Ou HT, Erickson SR, Mukerjee B, Piette JD, Bagozzi RP, Balkrishnan R. Comparative performance of comorbidity indices in discriminating health related behaviors and outcomes.
9. Wu CH, Erickson SR, Piette JD, Balkrishnan, R. Variation in health care utilization among Medicaid enrollees with major depressive disorder associated with patients' race and anxiety disorders.
10. Wu CH, Erickson SR, Piette JD, Balkrishnan R. Race and comorbid anxiety disorders as predictors of medication adherence and persistence among Medicaid enrollees with major depressive disorder.
11. Piette JD, et al. 12-month outcomes for a study of cognitive-behavioral therapy for patients with diabetes and depression.

Non-Peer-Reviewed Publications

1. Piette JD, Swindle RW, Baisden KL, Moos RH. Health services for VA substance abuse patients: Utilization and costs for Fiscal Year 1993. Department of Veterans Affairs Center for Health Care Evaluation, Palo Alto, CA, August 1994.
2. Piette JD, Baisden KL, Moos RH. Health services for VA substance abuse patient: Utilization and costs for Fiscal Year 1994. Department of Veterans Affairs Center for Health Care Evaluation, Palo Alto, CA, July 1995.
3. Piette JD, Baisden KL, Moos RH. Health services for VA substance abuse patients: Eight year trends in service utilization (Fiscal Years 1988, 1993, and 1995). Department of Veterans Affairs Center for Health Care Evaluation, Palo Alto, CA, June 1996.
4. Piette JD, Nazari S, Moos RH. VA care for substance abuse patients: Indicators of facility and VISN performance (Fiscal Years 1995 and 1996). Department of Veterans Affairs Center for Health Care Evaluation, Palo Alto, CA, May 1997.
5. Piette JD, Baisden KL, Moos RH. Health services for VA substance abuse and psychiatric patients: Utilization for Fiscal Year 1996. Department of Veterans Affairs Center for Health Care Evaluation, Palo Alto, CA, May 1997.
6. Piette JD, Baisden KL, Moos RH. Health services for VA substance abuse and psychiatric patients: Utilization for Fiscal Year 1997. Department of Veterans Affairs Center for Health Care Evaluation, Palo Alto, CA, April 1998.
7. Piette JD, Baisden KL, Moos RH. VA care for substance abuse patients: Indicators of facility and VISN performance (Fiscal Years 1996 and 1997). Department of Veterans Affairs Center for Health Care Evaluation, Palo Alto, CA, May 1998.
8. Piette JD, Nazari S, Olshen RA. Predicting readmission among substance abuse patients. Technical Report #198. Stanford, CA: Department of Statistics, Stanford University, July 1998.
9. Piette JD, Baisden KL, Moos RH. Health services for VA substance abuse and psychiatric patients: Comparison of utilization in Fiscal Years 1995 and 1998. Department of Veterans Affairs Center for Health Care Evaluation, Palo Alto, CA, May 1999.
10. Fong WX, Piette JD. VA care for substance abuse patients: Indicators of facility and VISN performance (Fiscal Years 1997 and 1998). Department of Veterans Affairs Center for Health Care Evaluation, Palo Alto, CA, October 1999.
11. Piette JD, Fong WX. Health services for VA substance abuse and psychiatric patients: Comparison of utilization in Fiscal Years 1999, 1998, and 1995. Department of Veterans Affairs Center for Health Care Evaluation, Palo Alto, CA, August 2000.
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13. Piette JD. Interactive resources for patient education and support. *Diabetes Spectrum* 2000;13(2):110-112.
14. Fong WX, Piette JD. VA care for substance abuse patients: Indicators of facility and VISN performance (Fiscal Years 1998 and 1999). Department of Veterans Affairs Center for Health Care Evaluation, Palo Alto, CA, September 2000.
15. Piette JD, Fong WX. Health services for VA substance abuse and psychiatric patients: Comparison of utilization in Fiscal Years 2000, 1999, and 1995. Department of Veterans Affairs Center for Health Care Evaluation, Palo Alto, CA, June 2001.
16. Piette JD. Book Review for the *Community Psychologist*: Petersen DJ, Alexander GR. *Needs Assessment in Public Health*. Spring, 2002;35:11-12.
17. Kerr E, Hayward R, Krein S, Piette JD. SDR 01-019: Translating Research Into Action for Diabetes in the VA: Preliminary Report. Submitted to Dr. John Demakis, VA Central Office, August 2003.
18. Piette JD. Using Telephone Support to Manage Chronic Disease. *The California Health Care Foundation*, 2005. <http://www.chcf.org/topics/chronicdisease/index.cfm>
19. Piette JD. The future of diabetes disease management: integrating lessons learned from clinical, health services, and policy research. *American Journal of Managed Care* 2005;11(4):203-5.
20. Regenstein M, Huang J, Schillinger D, Lessler D, Reilly B, Brunt M, Johnson J, Piette JD. Caring for Patients with Diabetes in Safety-Net Hospitals and Health Systems: What Patients Say About Their Care. National 2005, Public Health and Hospital Institute.
21. Piette JD. Reaching Out to Chronically-Ill Veterans: The Potential of Interactive Voice Response Calls. *VA Forum*, September 2005.
22. Rosenthal G, Berlowitz D, Piette JD. Report of the VA HSR&D Quality Measurement Field Based Scientific Advisory Panel. Submitted to VA Central Office on September 6, 2005.
23. Piette JD. Medication cost-sharing: helping chronically ill patients cope. Editorial. *Medical Care* 2005;43(10):947-950.
24. Piette JD. Rx for Affordability. Helping Patients Cope with Medication Costs. *California Healthcare Foundation*. 2005; www.chcf.org/documents/chronicdisease/RxForAffordabilityHelpingPatientsCope.pdf
25. Piette JD. Innovation in chronic illness care for older adults: addressing disparities in health status worldwide. Presented to the *National Academy of Science*, Commission on the Social Determinants of Health, May 2007.
26. Piette JD. Literacidad en Salud [*Health Literacy*]. *Medwave* [Chilean review journal for current medical research] May 2009; 19(5):1-3.
27. Piette JD. Moving beyond the notion of ‘self’ care. *Chronic Illness* 2010;6(1):3-6.
28. Piette JD, Beard A. Automated telephone monitoring and behavior change calls.

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1. Mor V, Fleishman JA, Masterson-Allen S, Piette JD. *Networking AIDS Services: Promises and Problems of Consortium Building*. Melrose Park, IL: Health Administration Press, 1994.
2. Piette JD, Kaplan R, eds. *Preventing Illness Among People with Coronary Heart Disease*. Binghamton, NY: The Hawthorn Press, 1996.
3. Piette JD, ed. *The Delivery of Health Care Services to Persons with HIV Disease: New Empirical Studies*. (Supplement to Medical Care.) Rockville, MD: Lippincott Williams & Wilkins, 2005.

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